

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO. **09/509098**

FILING DATE

APPLICANT(S)

7/23/4 CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		1		1		
3		2		1		
4		2		1		
5		1		1		
6		1		1		
7	1		1		1	
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47						1
48						1
49						1
50						1
TOTAL IND.		3		3		3
TOTAL DEP.		10		15		15
TOTAL CLAIMS		13		18		18

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMEENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-2051

FORM PTO-1380 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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